



Charitable Organization Complaint Form

Office of the Attorney General
Consumer Protection Division
6 State House Station
Augusta, Maine 04333-0006

The Maine Attorney General’s office has jurisdiction to investigate complaints that involve 1) misappropriation of charitable funds; 2) fraudulent or misleading solicitation; or 3) breaches of trust. The AGO generally does not become involved in governance disputes within nonprofit organizations.

Your Contact Information:

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Evening: _____
(Example: 123-456-7890)

E-mail: _____

The Organization:

Organization Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Extension (optional): _____
(Example: 123-456-7890)

E-mail: _____

Name and Title of Contact Person at the Organization: _____

Your Complaint:

Describe the details of your complaint below. Please include as much detail as possible – continue on additional sheets if necessary.

Do you have any evidence or documents in your possession that relate to your complaint? Yes No

If yes, please list the evidence below. Examples of supporting evidence includes, but is not limited to, canceled checks, bank records, invoices, letters, emails, printed solicitations, brochures and flyers. Please attach **copies** of the documents relating to this complaint to the back of the form or to the email.

1. _____
2. _____
3. _____

What action has already been taken to try to resolve this problem either within the organization, with any other government agency or law enforcement agencies?

Have you previously contacted the ME Attorney General's Office about this problem? Yes No

If Yes, please specify dates of previous contacts with the _____
ME AG's Office and/or other agencies you have contacted: _____

Review, sign, and submit your complaint

1. **Confidentiality of your complaint:** Your complaint will be considered confidential and will not be disclosed to any member of the public. Your record in its entirety may, however, be disclosed to law enforcement and regulatory agencies who may assist in resolving your complaint. Also, we may need to discuss the substance of your complaint with the charity, and may provide a copy of your complaint to the charity with your identifying information blacked out.
2. **Read this important notice and sign your complaint.**
I understand that when I submit this complaint that the Maine Attorney General's Office cannot give me legal advice and cannot act as my personal lawyer. I also understand that the Maine Attorney General's Office may need to forward this complaint to another agency for response.
3. **The complaint should be mailed to the address at the top of this form.** If you have any questions or concerns, please contact the Consumer Protection Division by calling 207-626-8861 and leaving a message or by email at consumer.mediation@maine.gov.

Signed: _____

Date: _____